



The Commonwealth of Massachusetts  
HINGHAM FIRE - RESCUE  
DEPARTMENT of FIRE PREVENTION & CODE COMPLIANCE  
210 Central Street, Hingham, MA 02043

FP 6 PERMIT # \_\_\_\_\_

\_\_\_\_\_  
DATE

## APPLICATION FOR PERMIT

TO: HEAD OF FIRE DEPARTMENT

**HINGHAM**

CITY OR TOWN

**DIG SAFE NUMBER**

Start Date: \_\_\_\_\_

In accordance with the provisions of M.G.L. Chapter 148 and / or 527 CMR application is hereby made.

Permission To: **DUMPSTERS to be in accordance with 527 CMR 34:00 and shall be in**  
& Restrictions: **accordance with all applicable Massachusetts Board of Fire**  
**Prevention Regulations.**

State clearly  
purpose for  
which permit  
is requested

Location of Container on Property: \_\_\_\_\_

Size of Container: \_\_\_\_\_

Company Supplying Container: \_\_\_\_\_

Companies Emergency Phone Number: \_\_\_\_\_

at \_\_\_\_\_

(Give location by street and no., or describe in such a manner as to provide adequate identification of location)

Date Permit Issued \_\_\_\_\_

By \_\_\_\_\_

\_\_\_\_\_  
APPLICANT NAME

Not Applicable

COMPETENCY TYPE

\_\_\_\_\_  
COMPETENCY NUMBER

\_\_\_\_\_  
ADDRESS

Date of expiration \_\_\_\_\_

Fee \$ **25.00**

☐ Paid ☐ Due ☐ N/A

\_\_\_\_\_  
INSTALLER'S PHONE

OFFICIAL ISSUING PERMIT

\_\_\_\_\_  
(Signature of applicant)